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021567 7590 01/28/2005

WELLS ST. JOHN P.S.  
601 W. FIRST AVENUE, SUITE 1300  
SPOKANE, WA 99201  
04/25/2005 MBEYENE2 00000007 10612839

01 FC:1501	1400.00 OP
02 FC:1504	300.00 OP
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I hereby certify that the Issue Fee is being hand-delivered to the Issue Fee Branch, Assistant Commissioner of Patents, Washington, D.C. 20231, on the date indicated below

Sunny Downs	(Depositor's name)
<i>Sunny Downs</i>	(Signature)
1-22-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/612,839	07/03/2003	Luan C. Tran	MI22-2339	7177

TITLE OF INVENTION: METHODS OF FORMING CONDUCTIVE CAPACITOR PLUGS, METHODS OF FORMING CAPACITOR CONTACT OPENINGS, AND METHODS OF FORMING MEMORY ARRAYS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	04/28/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
LE, DUNG ANH		2818		438-398000	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Wells St. John, P.S.

2. \_\_\_\_\_

3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Micron Technology, Inc.

Boise, Idaho, U.S.A.

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

- Issue Fee
- Publication Fee (No small entity discount permitted)
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The Director is hereby authorized by charge any deficiencies or credit any overpayment, to Deposit Account Number 23-0925 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

4/20/05

Typed or printed name

James D. Shaurette

Registration No.

39,833

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